

State of South Dakota

Candidate's or Committee's Report of Receipts and Expenditures

Candidates and candidate committees: File in the office where you filed your nominating petition. PACs, political party, ballot question and other committees: File with Elections Department, Secretary of State's Office, 500 E Capitol Ave., Pierre, SD 57501-5070 See pages 9.8.10 of the Guideline Rook for specific instructions on completing this report.
See pages 9 & 10 of the Guideline Book for specific instructions on completing this report.
Name of Candidate or Committee Hope OKerlund Matchan
Complete Mailing Address 3900 S. Florence Ave., Sioux Falls, S.D. 57103
Name of Person Making Report Dorothy Koepsell Daytime Phone Number 605.338-7420
If you are a candidate, what office are you seeking?
If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed.
Type of Report (See pages 4 & 5 of Guideline Book) Campaign Finance Report
For Reporting Period Ending (See pages 4 & 5 of Guideline Book) May 27, 2006
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The following verification must be completed before submitting report.
VERIFICATION OF PERSON MAKING REPORT
I Doyothy Koepsell (print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete.
Date: May 27, 2004 Dobb & Malet
Candidate Signature or Signature of Committee Treasurer or Chairperson
Revised July 2001 Filed this day of
_ (June 0.4
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SECRETARY OF STATE

Name of Candidate or Committee_	Hope Okerlund	Matchan
For the reporting period ending	May 27, 2006	

Schedule A – Direct Contributions

This schedule is used for reporting all direct contributions. You must keep a record of all contributors, but for this report you may combine all contributions of \$100 or less from individuals and the same from political parties and enter these sums as unitemized contributions on their respective lines below and on the next page. Any contribution of more than \$100 or aggregate during a calendar year from an individual or political party and all contributions from PAC's must be entered as a separate item (itemized) giving the amount, name, address and place of employment (if applicable) of the contributor. Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space, or you may attach additional sheets of paper.

Unitemized Contributions from I			Ψ _	3, 589.
Itemized Contributions from Ind		Place of Employment		
Name	Residence Address	(Name of Employer)	*	فهسن
Bonnie Campbell		Retired	\$ _	150.
	5) cux Falls, S.D 5-7109	 _ _ 	3 -	
David S. Day	315 Forest Ave.	Professor U.S.D.	\$ _	2000
· · · · · · · · · · · · · · · · · · ·	Vermillion, S.D.		\$ _	·
Eleanor I. Miller	1409 W. Dow Rummel St.	-	\$_	500.
-	Apt 318, Sioux Falls 5716		, \$ -	C+4I
Julie M. Tripp	1317 Broadway ANE. S.	Principle - Saux Rapids	, \$ _	500°°
	Sauk Rapids MN52379	School Distric	r \$ _	
Lorrie L. Lindquist	2609 E. Regency Ct.	Self Employed	\$ _	200.00
	Sioux Folls 57103		\$ _	
Becky Nelson	3533 S. Spencer Blud.	Sioux Valley Hospital	\$_	25°.
	Sioux Falls, S.D. 5710		\$_	
Marilyn Johnson	1439 West uprd Hoflace	Metired	\$_	1,000.
	Sioux Falls S.D 57101		\$ _	0
Ross Johnson	1439 Westward Ho Place	Retired	\$ -	500.°
	Sinax Falles D.57		\$_	
Teffand Lorrie Okerlw	ad 48035 Riverside Place	Self Employed	\$_	3,000.
	Sioux Falls SD. 57/08	•	\$_	
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	<u> </u>		\$	
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			\$	
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			\$.	
			\$	
			\$	
			\$	
Total of Itemized Contributions	from Individuals:		*\$	4,300

Name of Candidate or Committee		
For the reporting period ending		
Schedule A – Direct Contributions (continued)		
Unitemized Contributions from Political Parties:		*\$
Itemized Contributions from Political Parties	¥1	
Party Name	Address	٦.
		\$
		\$
Total of Itemized Contributions from Political Part	ies:	*\$
	nittees (PAC's) - All contributions from PAC's must	be itemized.
PAC Name	Address	7 .
		\$
		\$
		\$
		\$
		\$
	-	\$ <u> </u>
		\$
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		*
		\$
		\$
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		- \$
		- \$
Total of Itemized Contributions from Political Acti	on Committees:	 *\$
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Total of All Direct Contributions (Sum of all lines	with an *)	\$

Name of Candidate or Committee:_	Hove OKexlund Matchan	rippendi		
For the reporting period ending:	Hope OKexlund Matchan May 27, 2006			
Schedule B - Fund-Raising Events Proceeds List on this schedule fund-raising events held to raise money for the candidate and the net proceeds derived from each event. If a contributor gives more than \$100 or their contribution results in their aggregate being more than \$100 in the calendar year, those contributions must be itemized on Schedule A.				
Type or Name of Event		Net Proceeds		
Total:				
contributor, residence address and place of er Nature of Non-Cash Contribution	Name, Residence Address & Place of Employment	Estimated Value		
Sign - A- Rama	1104 E 10 5t., Sioux Falls, S.D. 57103	118,63		
· · · · · · · · · · · · · · · · · · ·				
Total:				
Use this schedule to report any refunds, inter	Schedule D - Other Income est earned or other income which is not a direct contribution.			
•		Amount		
Source of Income		Amount		
		 		
Total:				

Name of Candidate or Committee	Hope Okerlund	Matchan
For the reporting period ending:_	May 27, 2006	

Schedule E – Expenditures

This schedule is to report all expenditures relating to a candidate's campaign. Line items have been provided for reporting common expenses. All other expenses should be listed. All contributions to candidates and committees must be listed individually.

Expenses		cpenses Contributions Made to Candidates and Comm	
ltem	Amount	Name of Candidate or Committee	Amount
Advertising	11,40400		
Consulting			
Postage	170.79		
Printing	142.66		
Rent	7 7 51		
Salaries			
Telephone			12
Travel			
Utilities			
		· · · · · · · · · · · · · · · · · · ·	
	List other expense		
tems below	amounts below		
Printed Checks	19,95		
Veter List Envelopes Meeting Ex (Food)	49.43		
Envelopes	37.07		
Meeting Ex (Food)	49.34		
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	11,813.24	<u> </u>	

Schedule F - Debts and Obligations This schedule is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a ser				
ved to:	illed, estimate the amount of the obligation. Purpose:	Amount		
				
				
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Na	me of Candidate or Committee: Hope	Otterlund Matchan		
For	the reporting period ending: May	27, 2006		
This from	Summary Page This summary sheet will give a brief outline of all campaign finance activity during this reporting period. Please transfer all totals from the schedules previously completed.			
1.	Amount on hand, if any, at the beginning	of the reporting period:	\$	
2.	Receipts			
	Schedule A - Direct Contributions	\$ 8,889 ==		
	Schedule B - Fund-Raising Events	\$		
	Schedule C - In Kind Contributions	\$		
	Schedule D - Other Income	\$	*	
	Total of all Receipts	\$ 8,889.		
3.	Total Monetary Receipts (A+B+D)		\$ 8,889.	
4.	Candidate's Personal Contribution to Own	n Campaign	\$ 8,809.70	
5.	Monetary Loans to Candidate or Commit	tee During Reporting Period	\$	
6.	Monetary Loans Repaid During Reportin	g Period	\$	
7.	Expenditures - Schedule E		\$ <u>11,873,24</u>	
8.	Unpaid Obligations - Schedule F	\$		
9.	Amount on hand at the close of this report. This should equal lines (1+3+4+5) – (6+4)	- -	\$ <u>5,835.4</u> 6	

Appendix C

SECRETARY OF STATE

State Capitol, Suite 204 500 East Capitol Avenue Pierre, South Dakota 57501-5070 sdsos@state.sd.us www.sdsos.gov



Chris Nelson Secretary of State

> Chad Heinrich Deputy

State of South Dakota

Voluntary Statement of Organization for a Political Action or Ballot Question Committee

State law does not require new political action (PAC) or ballot question committees to register with the Secretary of State. Law does however require these committees to file campaign finance reports periodically following the commencement of political activity. This voluntary registration form will give the Secretary of State the information necessary to send your committee the proper reporting forms prior to the deadline for filling.

FULL NAME OF COMMITTEE:		
MAILING ADDRESS:	÷	
COMMITTEE TREASURER:	Air	
PHONE:		
	Ballot Question):nittee, please also indicate the measure which you are	
Date:	Signature of person submitting voluntary registration	